Application or Docket Number

## PATENT APPLICATION FEE DETERMINATION RECORD

Effective January 1, 2003

10-617-788

| CLAIMS AS FILED - PAF<br>(Column 1)   |  |   |              |                               | (Column 2)   |                   |         | SMALL ENTITY TYPE |                        |        | OTHER THAN<br>OR SMALL ENTITY |                        |  |
|---|--|---|--------------|-------------------------------|--------------|-------------------|---------|-------------------|------------------------|--------|-------------------------------|------------------------|--|
| TOTAL CLAIMS  |  |   | 8            |                               |              |                   |         | RATE              | FEE                    | <br>   | RATE                          | FEE                    |  |
| FOR   |  |   | NUMBER FILED |                               | NUMBER EXTRA |                   | -       | ASIC FEE          | 375.00                 | OR     | BASIC FEE                     | 750.00                 |  |
| TOTAL CHARGEABLE CLAIMS   |  |   | g minus 20=  |                               | * 0          |                   |         | X\$ 9=            |                        | OR     | X\$18=                        |                        |  |
| INDEPENDENT CLAIMS  |  |   | 2 minus 3 =  |                               | * 0          |                   |         | X42=              |                        | OR     | X84=                          |                        |  |
| MU  | LTIPLE DEPEN                                   | IDENT CLAIM P                             | RESENT       |                               |              |                   |         | +140=             |                        | OR     | +280=                         |                        |  |
| * If  | the difference                                 | in column 1 is                            | less than ze | ro, ente                      | r "0" in c   | olumn 2           | -       | TOTAL             |                        | OR     | TOTAL                         | 750                    |  |
| CLAIMS AS AMENDED - PART II   |  |   |              |                               |              |                   |         | ×                 | •                      |        | OTHER                         | 4-2-                   |  |
|   | Angele of the second                           | (Column 1)                                |              | (Column                       |              | (Column 3)        |         | SMALL ENTITY      |                        | OR     | SMALL                         | ENTITY                 |  |
| AMENDMENT A   |  | CLAIMS<br>REMAINING<br>AFTER<br>AMENDMENT |              | HIGH<br>NUM<br>PREVIO<br>PAID | BER<br>OUSLY | PRESENT<br>EXTRA  |         | RATE              | ADDI-<br>TIONAL<br>FEE |        | RATE                          | ADDI-<br>TIONAL<br>FEE |  |
|   | Total  | *   | Minus        | **                            |              | =                 |         | X\$ 9=            |                        | OR     | X\$18=                        |                        |  |
|   | Independent                                    | *<br>ENTATION OF M                        | Minus        | ***                           | F.CLAIM      |                   |         | X42=              |                        | OR     | X84=                          |                        |  |
|   | TITIOTTTTESE                                   | INTATION OF MI                            | OLIN LL DLI  | LINDLIN                       | CLAIIVI      |                   | 1       | +140=             |                        | OR     | +280=                         |                        |  |
|   |  |   |              |                               | 195          |                   | AD      | TOTAL<br>DIT. FEE | -                      | OR     | TOTAL<br>ADDIT. FEE           |                        |  |
|   | (Column 1) (Column 2) (Column 3)               |   |              |                               |              |                   |         |                   |                        |        |                               |                        |  |
| AMENDMENT B   |  | CLAIMS<br>REMAINING<br>AFTER<br>AMENDMENT |              | HIGH<br>NUM<br>PREVIO<br>PAID | BER<br>OUSLY | PRESENT<br>EXTRA  |         | RATE              | ADDI-<br>TIONAL<br>FEE |        | RATE                          | ADDI-<br>TIONAL<br>FEE |  |
|   | Total  | *   | Minus        | **                            |              | =                 |         | X\$ 9=            |                        | OR     | X\$18=                        |                        |  |
|   | Independent                                    | *   | Minus        | ***                           |              | =                 |         | X42=              | Va. 11 1               | OR     | X84=                          |                        |  |
|   | FIRST PRESENTATION OF MULTIPLE DEPENDENT CLAIM |   |              |                               |              |                   |         |                   |                        |        |                               |                        |  |
|   |  |   |              |                               | Ŀ            | +140=             |         | OR                | +280=                  | ė m    |                               |                        |  |
|   |  |   |              |                               | AD           | TOTAL<br>DIT. FEE |         | OR                | TOTAL<br>ADDIT. FEE    |        |                               |                        |  |
|   |  | (Column 1) (Column 2) (Column 3)          |              |                               |              |                   |         |                   |                        |        |                               |                        |  |
| AMENDMENT C   |  | CLAIMS<br>REMAINING<br>AFTER<br>AMENDMENT |              | HIGH<br>NUM<br>PREVIO<br>PAID | BER<br>OUSLY | PRESENT<br>EXTRA  |         | RATE              | ADDI-<br>TIONAL<br>FEE |        | RATE                          | ADDI-<br>TIONAL<br>FEE |  |
|   | Total  | *   | Minus        | **                            | · · · · · ·  | =                 | :       | X\$ 9=            |                        | OR     | X\$18=                        |                        |  |
|   | Independent                                    | *   | Minus        | ***                           |              | =                 |         | X42=              |                        | OR     | X84=                          |                        |  |
|   | FIRST PRESENTATION OF MULTIPLE DEPENDENT CLAIM |   |              |                               |              |                   |         |                   |                        |        |                               |                        |  |
| * If the entry in column 1 is less than the entry in column 2, write "0" in column 3.   |  |   |              |                               |              |                   |         |                   |                        | OR     | +280=                         |                        |  |
| ** If the "Highest Number Previously Paid For" IN THIS SPACE is less than 20, enter "20." ADDIT. FEE ****If the "Highest Number Previously Paid For" IN THIS SPACE is less than 3, enter "3." |  |   |              |                               |              |                   |         |                   |                        | OR     | TOTAL<br>ADDIT. FEE           |                        |  |
|   |  | nber Previously Pa                        |              |                               |              |                   | r found | I in the app      | ropriate box           | cin co | lumn 1.                       |                        |  |